

The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are competent, with the one chosen by the applicant. The full name or two-letter code of that Authority may be indicated by the applicant on the line below:

IPEA/ JP

PCT

CHAPTER II

DEMAND

under Article 31 of the Patent Cooperation Treaty:
The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty.



For International Preliminary Examining Authority use only

Identification of IPEA		Date of receipt of DEMAND	
Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION		Applicant's or agent's file reference P204-0003WO	
International application No. PCT/JP2004/001145	International filing date (day/month/year) 04/02/2004	(Earliest) Priority date (day/month/year) 05/02/2003	
Title of invention COLOR CONVERSION METHOD AND PROFILE GENERATION METHOD			
Box No. II APPLICANT(S)			
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko Ohta-ku, Tokyo 146-8501 Japan		Telephone No. 03-3758-2111	
		Facsimile No. 03-5482-7362	
		Teleprinter No.	
		Applicant's registration No. with the Office	
State (that is, country) of nationality: Japan		State (that is, country) of residence: Japan	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) SHIMADA, Takuya c/o CANON KABUSHIKI KAISHA 3-30-2, Shimomaruko Ohta-ku, Tokyo 146-8501 Japan			
State (that is, country) of nationality: Japan		State (that is, country) of residence: Japan	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) 			
State (that is, country) of nationality:		State (that is, country) of residence:	
<input type="checkbox"/> Further applicants are indicated on a continuation sheet.			

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State (that is, country) of nationality: State (that is, country) of residence:	
<input type="checkbox"/> Further applicants are indicated on a continuation sheet.	

Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCEThe following person is ☒ agent ☐ common representativeand ☒ has been appointed earlier and represents the applicant(s) also for international preliminary examination.☐ is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.☐ is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.Name and address: (Family name followed by given name; for a legal entity, full official designation.
The address must include postal code and name of country.)7642 Patent Attorney OHTSUKA, Yasunori
7th FL., SHUWA KIOICHO PARK BLDG., 3-6,
KIOICHO,
CHIYODA-KU, Tokyo 102-0094
Japan

Telephone No.

03-5276-3241

Facsimile No.

03-5276-3242

Teleprinter No.

Agent's registration No. with the Office

☐ Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.**Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION****Statement concerning amendments: ***

1. The applicant wishes the international preliminary examination to start on the basis of:

☒ the international application as originally filedthe description ☐ as originally filed☐ as amended under Article 34the claims ☐ as originally filed☐ as amended under Article 19 (together with any accompanying statement)☐ as amended under Article 34the drawings ☐ as originally filed☐ as amended under Article 342. ☐ The applicant wishes any amendment to the claims under Article 19 to be considered as reversed.3. ☐ The applicant wishes the start of the international preliminary examination to be postponed until the expiration of the applicable time limit under Rule 69.1(d).4. ☐ The applicant expressly wishes the international preliminary examination to start earlier than at the expiration of the applicable time limit under Rule 54bis.1(a).

* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

Language for the purposes of international preliminary examination: English

☒ which is the language in which the international application was filed.☐ which is the language of a translation furnished for the purposes of international search.☐ which is the language of publication of the international application.☐ which is the language of the translation (to be) furnished for the purposes of international preliminary examination.**Box No. V ELECTION OF STATES**

The filing of this demand constitutes the election of all Contracting States which are designated and are bound by Chapter II of the PCT.

Box No. VI CHECK LIST

The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:

- | | | |
|--|---|--------|
| 1. translation of international application | : | sheets |
| 2. amendments under Article 34 | : | sheets |
| 3. copy (or, where required, translation) of amendments under Article 19 | : | sheets |
| 4. copy (or, where required, translation) of statement under Article 19 | : | sheets |
| 5. letter | : | sheets |
| 6. other (specify) | : | sheets |

For International Preliminary Examining Authority use only
received not received

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

The demand is also accompanied by the item(s) marked below:

- | | |
|--|--|
| 1. <input checked="" type="checkbox"/> fee calculation sheet | 5. <input type="checkbox"/> statement explaining lack of signature |
| 2. <input type="checkbox"/> original separate power of attorney | 6. <input type="checkbox"/> sequence listing in computer readable form |
| 3. <input type="checkbox"/> original general power of attorney | 7. <input type="checkbox"/> tables in computer readable form related to a sequence listing |
| 4. <input type="checkbox"/> copy of general power of attorney; reference number, if any: | 8. <input checked="" type="checkbox"/> other (specify): revenue stamps of IP fee, certificate of payment |

Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).

OHTSUKA, Yasunori



For International Preliminary Examining Authority use only

1. Date of actual receipt of DEMAND:

2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):

3. ☐ The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply.

☐ The applicant has been informed accordingly.

4. ☐ The date of receipt of the demand is WITHIN the time limit of 19 months from the priority date as extended by virtue of Rule 80.5.

5. ☐ Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82.

6. ☐ The date of receipt of the demand is AFTER the expiration of the time limit under Rule 54bis.1(a) and item 7 or 8, below, does not apply.

7. ☐ The date of receipt of the demand is WITHIN the time limit under Rule 54bis.1(a) as extended by virtue of Rule 80.5.

8. ☐ Although the date of receipt of the demand is after the expiration of the time limit under Rule 54bis.1(a), the delay in arrival is EXCUSED pursuant to Rule 82.

For International Bureau use only

Demand received from IPEA on:

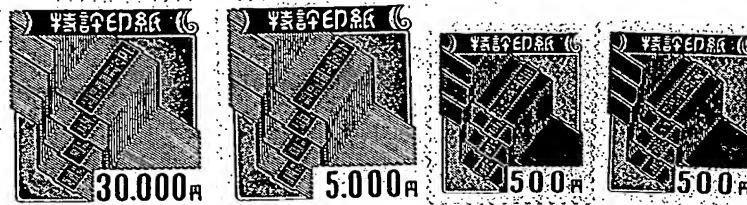
PCT

FEE CALCULATION SHEET

Annex to the Demand

International application No. PCT/JP2004/001145	For International Preliminary Examining Authority use only
Applicant's or agent's file reference P204-0003WO	Date stamp of the IPEA
Applicant CANON KABUSHIKI KAISHA	
CALCULATION OF PRESCRIBED FEES	
1. Preliminary examination fee	JPY 36,000- P
2. Handling fee (<i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i>)	JPY 16,600- H
3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box	<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> JPY 52,600- </div> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 0 auto;"> TOTAL </div>
MODE OF PAYMENT	
<input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)	<input type="checkbox"/> cash
<input type="checkbox"/> cheque	<input checked="" type="checkbox"/> revenue stamps
<input type="checkbox"/> postal money order	<input type="checkbox"/> coupons
<input checked="" type="checkbox"/> bank draft	<input type="checkbox"/> other (specify): Telegraphic Transfer Remittance
AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT <i>(This mode of payment may not be available at all IPEAs)</i>	
<input type="checkbox"/> Authorization to charge the total fees indicated above.	IPEA/ _____
<input type="checkbox"/> <i>(This check-box may be marked only if the conditions for deposit accounts of the IPEA so permit)</i> Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.	Deposit Account No.: _____
	Date: _____
	Name: _____
	Signature: _____

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PRELIMINARY EXAMINATION FEE ¥36,000

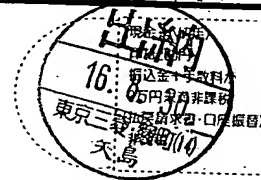
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徳大弁
大塚理
印康士

ご依頼日 04 08 30

預金払戻請求書・預金口座振替による振込受付書(兼手数料受取書)
振込金受取書(兼手数料受取書)

お振込先	銀行名 カタカナ	トウキョウミツ	銀行	支店名 カタカナ	トウキョウミツ	預金 種目	普通	貯蓄	その他
	銀行名 漢字	東京三菱銀行		支店名 漢字	虎ノ門	口座 番号	2074896		
お受取先	カタカナ	ワイルド・ピー・シー・ティー・エス・ユー・エス・ユー		姓と名の間を1マス空けて左めでご記入ください		金額の先頭にマニークをご記入ください			
	(おなまえ)	WIPO- PCT, Geneva	様	金額	16600	税込手数料	315	525	
お振込先	銀行名 カタカナ	トウキョウミツ	銀行	支店名 カタカナ		預金 種目	普通	貯蓄	その他
	銀行名 漢字	東京三菱銀行		支店名 漢字		口座 番号			
お受取先	カタカナ			姓と名の間を1マス空けて左めでご記入ください		金額の先頭にマニークをご記入ください			
	(おなまえ)		様	金額		税込手数料	315	525	
ご依頼人	カタカナ	オオツカサコフサ		姓と名の間を1マス空けて左めでご記入ください		金額の先頭にマニークをご記入ください			
	(おなまえ)	大塚国際特許事務所 弁理士 大塚康彦様		(おところ)	東京都千代田区紀元中町3番6号新紀元ビル7F				
ご連絡先 (おところ) 東京都千代田区紀元中町3番6号新紀元ビル7F									
手数料引落口座番号(一括支払のお客様のみご記入ください)									
預金 種目	1. 普		2. 当						
徴収 現振 後取り	消費税込手数料	1. 1.5	2. 1.5	3. 1.5	4. 1.5	5. 1.5	6. 1.5	7. 1.5	8. 1.5



小切手	振込	現金	円
			円
			円
			円

ご利用くださいましてありがとうございました。
株式会社 東京三菱銀行 支店
33203 3/3 152x182 04.03 920

HANDLING FEE

¥16,600